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DESIGN

PATENT APPLICATION (37 CFR 1.63)

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Attorney Docket Number 24372.10 **DECLARATION FOR UTILITY OR** Eilaz Babaev **First Named Inventor** COMPLETE IF KNOWN **Application Number** to be assigned Filing Date to be assigned Submitted after Initial Group Art Unit **Examiner Name**

As a below named inver	ntor, I hereby declare that:							
My residence, post office	address, and citizenship are	as stated below next to my	name.					
names are listed below) o	first and sole inventor (if only f the subject matter which is	claimed and for which a pa	tent is sought or	the invention ent	ntor (if plural			
ULTRASONIC ME	ETHOD AND DEVIC	E FOR LYPOLYTI	C THERAP	Y				
the specification of which is attached hereto	(1100	e of the Invention)						
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I hereby state that I have re amended by any amendment	eviewed and understand the cent specifically referred to abo	contents of the above iden	tified specificatio	n, including the cl	aims, as			
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[Page 1 of 2]

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Given Name (first and middle (if anyl) Family Name or Sumama												
Eilaz Babaev												
inventor's Signature		Jony -				· Date 3/6				3/6/02		
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Additional inventors are being named on the ___supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto